



**U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE**

DECLARATION

ATTORNEY'S DOCKET NO.:
1662/6040761

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **NOVEL CRYSTALLINE FORMS OF GATIFLOXACIN AND PROCESSES FOR PREPARATION**, the specification of which was filed on **December 12, 2003** as U.S. Serial No. **10/735,029**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

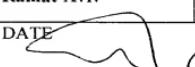
APPLICATION NUMBER	FILING DATE (day, month, year)
60/432,961	12 December 2002
60/448,062	15 February 2003
60/465,534	25 April 2003

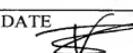
SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Patrick J. Birde, Esq.
KENYON & KENYON LLP
One Broadway
New York, New York 10004-1050

CUSTOMER NUMBER 26646

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	AMIR	Ehud	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Ramat-Aviv	Israel	Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	48/14 Tagor Str.	Ramat-Aviv	69341, Israel
SIGNATURE	15.1.07	DATE	

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	NIDDAM-HILDESHEIM	Valerie	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Kadima	Israel	Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	P.O. Box 3948	Kadima	60920, Israel
SIGNATURE	15.01.2007	DATE	

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	STERIMBAUM	Greta	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Rishon-Lezion	Israel	Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	10/10 Kaplinsky St.	Rishon-Lezion	75241, Israel
SIGNATURE	DATE <i>16.1.07</i>		

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	WIZEL	Shlomit	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Petah Tiqva	Israel	Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	Yehuda Hanassi 2	Petah Tiqva	49742, Israel
SIGNATURE	DATE <i>16.1.07</i>		